| PATENT APPLICATION FEE DETERMINATION RECORD   |  |   |               |                                       |                     |                  |                   |                   | Application or Docket Number |                    |                            |                 |    |
|---|--|---|---------------|---------------------------------------|---------------------|------------------|-------------------|-------------------|------------------------------|--------------------|----------------------------|-----------------|----|
| Effective October 1, 2003   |  |   |               |                                       |                     |                  |                   | ,                 | AIS-0014                     |                    |                            |                 |    |
| _   |  | CLAIMS A                                  | ) - PART      | SN SN                                 |                     |                  | SMALL<br>TYPE     | MALL ENTITY PE OR |                              |                    | OTHER THAN<br>SMALL ENTITY |                 |    |
| TOTAL CLAIMS  |  |   |               | <u> </u>                              |                     |                  | -                 | RATE              | FEE                          | ֓֞֞֞֓֓֓֟ <u>֟</u>  | RATE                       | FEE             | _  |
| FOR   |  |   | NUMBE         | NUMBER FILED NUM                      |                     |                  | ·                 | BASIC FI          |                              |                    | BASIC FE                   | <del></del>     |    |
| TOTAL CHARGEABLE CLAIMS   |  |   | / п           | / minus 20= * O                       |                     |                  |                   | X\$ 9=            | -                            | OR                 | \                          | 1770.0          | _  |
| INDEPENDENT CLAIMS ·  |  |   |               | / minus 3 =                           |                     |                  |                   | X43=              | +                            | -107               | <u> </u>                   | <del> </del>    | _  |
| М   | ULTIPLE DEPE                                   | ENDENT CLAIM I                            | PRESENT       | RESENT                                |                     |                  |                   |                   | -                            | OR                 | <del> </del>               |                 |    |
| •   | f the differenc                                | e in column 1 is                          | s less than : | less than zero, enter "0" in column 2 |                     |                  | ' · [             | +145=             |                              | OR                 | . +290=                    |                 |    |
| • If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |               |                                       |                     |                  |                   | TOTAL             |                              | OR                 | TOTAL                      | 772             |    |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |  |   |               |                                       |                     |                  |                   | SMALL             | . ENTITY                     | OR                 |                            | THAN<br>ENTITY  |    |
| AMENDMENT A   | - / /21  | CLAIMS<br>REMAINING                       |               | HIGHE                                 | EST<br>BER<br>JUSLY |                  | 7 [               | RATE              | ADDI-<br>TIONAL<br>FEE       | ר`` ד              | RATE                       | ADDI-           | -1 |
|   | 710/06   | AFTER<br>AMENDMENT                        |               | PREVIO                                |                     | PRESENT<br>EXTRA |                   |                   |                              |                    |                            | TIONAL<br>FEE   | -  |
|   | Total  | . 4                                       | Minus         | 20                                    | 2                   | =                |                   | X\$ 9=            |                              | ØÄ                 | X\$18=                     | -               | 1  |
|   | FIRST PRESENTATION OF MU                       |   | Minus         | - 2<br>DEDENIES - 2                   |                     | =                |                   | X43=              |                              | OR                 | X86=                       |                 | 7  |
|   | FINST PRESI                                    | ENTATION OF M                             | OLTIPLE DE    | PENDENT                               | CLAIM               |                  | ľ                 | +145=             | 1                            | ØA                 | +290=                      |                 | 1  |
|   |  |   |               |                                       |                     |                  | L                 | TOTAL             |                              | 1 <sub>~</sub> '   | TOTAL                      |                 | ┨  |
|   |  | (Column: 1)                               |               | (Colum                                | n 2)                | (Column 3)       | AI                | DDIT. FEE         | <u> </u>                     | 10,1               | ADDIT. FEE                 |                 | 1  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE                                 | ST<br>ER<br>JSLY    |                  |                   | RATE              | ADDI-                        | ) r                |                            | ADDI-           | ┨  |
|   |  |   |               | PREVIOU PAID FO                       |                     | PRESENT<br>EXTRA |                   |                   | TIONAL                       |                    | RATE                       | TIONAL          |    |
|   | Total  | •   | Minus         | **                                    |                     | =                |                   | X\$ 9=            |                              | OR                 | X\$18≖                     | FEE             | 1  |
|   | Independent                                    | •   | Minus         | ***                                   |                     | = .              |                   | X43≃ ·            |                              |                    | X86=                       |                 | 1  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                       |                     |                  | $\vdash$          | 7,10-             |                              | OR                 | 7002                       |                 | ł  |
|   |  |   |               | •                                     |                     |                  | L                 | +145=             |                              | OR                 | +290=                      | •               | ı  |
|   |  |   |               |                                       |                     | AD               | TOTAL<br>DIT. FEE |                   | OR A                         | TOTAL<br>DDIT. FEE |                            | l               |    |
| _   |  | (Column 1)                                |               | (Column                               |                     | (Column 3)       |                   | • •               |                              |                    |                            |                 | ı  |
| MEN   | •  | REMAINING<br>AFTER                        |               | NUMBE<br>PREVIOU                      | A                   | PRESENT<br>EXTRA |                   | RATE              | ADDI-<br>TIONAL              |                    | RATE                       | ADDI-<br>TIONAL | ŀ  |
|   | Total  | AMENDMENT                                 |               | PAID FO                               |                     |                  | $\vdash$          |                   | FEE                          | .                  |                            | FEE             | I  |
|   | Independent                                    |   | Minus         | **                                    |                     | ±                | 1                 | <b>(\$ 9=</b>     |                              | OR                 | X\$18=                     | •               |    |
|   |  | NTATION OF MU                             | Minus DEG     | ENDENT C                              | 1 0124              | -                | ,                 | <b>X43</b> =      |                              | OR                 | X86=                       |                 | l  |
|   |  | · · ·                                     |               | ENDENI C                              | LAIM                | لللب             | 1                 | 145=              |                              | OR                 | +290=                      |                 |    |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3  |  |   |               |                                       |                     |                  |                   |                   |                              | ــان               | TOTAL                      |                 |    |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |               |                                       |                     |                  |                   |                   |                              |                    |                            |                 |    |
| • • •   | ie ingrest numi                                | on Previously Paid                        | FOF (Total or | independent)                          | is the h            | ighest number fo | ound i            | in the appr       | ropriate box                 | in colun           | nn 1.                      | •               | 1  |